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An Inaugural Dissertation
On
Dysentery.

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This being a subject, which from my limited opportunities I cannot be supposed to have much acquaintance with, (at least practical;) and were I to look over the whole catalogue of Diseases, I could not find one with which I am sufficiently so to write an essay on the history and treatment of it from my own personal experience; I must be satisfied (however great the pleasure it would afford me to give anything new and interesting in Medicine:) with merely detailing the information of others and making selections from the most approved treatises on the disease.

Dysentery is a disease that is much dreaded and one that may be produced by very slight causes. Sometimes it makes its appearance only amongst a few; and at others it appears to be endemial. "It is a disease which is very incidental to armies; frequently appearing, when after or during warm weather they are long exposed to heavy rains; or are long confined to low swampy grounds."

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The contagious nature of Dysentery is disputed by most of our modern authors, notwithstanding that we find it often prevailing in large Towns, and even Districts of our Country. But still it may be produced by certain states of the atmosphere; as are many of the diseases peculiar to the Southern section of our Country. It is said and on very good ground that the atmosphere may readily effect the alimentary canal, when charged with effluvia arising from substances in a state of decomposition; and no doubt this peculiar atmospherical constitution often gives rise to the disease, affecting all those who are immediately within its sphere of action. Nevertheless, this cannot prove the disease to be contagious, for by this term we are taught that one person must come actually in contact with another who has the disease; or at all events there must be some degree of communication. Dr. Mosely, who has attended to this subject particularly, and written extensively on it, denies the contagious nature of the disease. He says that it has prevailed as an epidemic in various parts of the world, always depending more or less on the vicissitudes of the weather, and brought on

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by exposure, causing a constriction of the surface of the body; or in other words obstructing the perspirable matter, and by this means creating (as I suppose) a gastric disease, which ultimately becomes one, of the intestines.

Numerous have been the definitions given this disease, and various are the opinions of Medical writers with regard to the immediate cause of it, which if it were well understood, or properly considered, the cure perhaps could more readily pointed out. The great Sydenham remarked that knowing the cause of a disease with a correct history of it, he never was at a loss to prescribe a suitable remedy for it, but without this knowledge he proceeded with great caution. He considered Dysentery to be a fever of the season, or one sui generis, turned inwards on the intestines. If it be a fever of this kind then, we must bear in mind the connection of the stomach with the skin. Cullen defines it to be a contagious fever, in which the patient has frequent and bloody stools, attended with much griping and tenesmus, and sometimes accompanied with nausea and vomiting. Notwithstanding the high authority of Cullen, I am inclined to believe that

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it is not a contagious disease, (unless where it assumes the Typhoid character) but on the contrary one sometimes of a highly inflammatory nature. As it occurs in Europe and other parts of the world, no doubt but that it may be considered contagious, in consequence of the fatality of the disease; but as it occurs in this Country, and more particularly in the Middle States nothing like contagion has been discovered, except where it takes place in Jails, Hospitals &c, when it puts on, as I observed before, the Typhoid type.

Like most of the complaints arising from peculiar states of the Atmosphere, it has its origin in the Stomach, and being readily communicated to the Intestines, propagates the disease permanently there, whence it acts on the whole system. We must therefore consider this disease as an Inflammatory affection of the Intestines, sometimes accompanied with either the Intermittent, Remittent, or Continued form of fever; occurring especially in Summer and Autumn. Dysentery frequently accompanies Catarrh, and alternates with Rheumatism; and hence it has been denominated a Catarrhal, or Rheumatic affection of the lower Intestines.

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with more or less griping and which often becomes exceedingly painful. Little appetite exists, and the food that is taken into the stomach is not digested at all, or at most very imperfectly. The skin is dry and parched, the complexion sallow, and the eyes very weak with a shrivelled and meagre expression of the countenance. This appears to depend on an engorgement of the great blood vessels, which diminishes the determination to the surface. Here I think the flannel roller may be applied with very great advantage, aided by the exhibition of diaphoretics. But where the disease is connected with visceral obstruction, the greatest benefit may be expected from the use of Mercury.

I have now brought to a conclusion all that I intended to say, or indeed think necessary to say in an inaugural dissertation, drawn entirely from the writings of those who from extensive practice have acquired considerable experience in the management of this important disease. Personal experience I could not give because I have it not, since from the circumscribed situation of my Fathers practice, and the uncommon healthi

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fulness of the place in which I studied, I have been enabled to see but few diseases, and those of the most common kind. I am therefore compelled to offer this essay imperfect as it is, (with the hope that it will not be objected to) from inability to produce a better one.

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